

2231

(CERTIFICATE AMENDED)  
SEE NOTATION

**PLACE OF BIRTH** **ARIZONA STATE BOARD OF HEALTH**

County of Maricopa BUREAU OF VITAL STATISTICS State Index No. 193 81

District of Mesa #3 ORIGINAL CERTIFICATE OF BIRTH Co. Register No. 849

Town of Mesa Local Registrar's No. 1-1-22 (7-29-71)

City of \_\_\_\_\_ (No. \_\_\_\_\_ St; \_\_\_\_\_ Ward)

FULL NAME OF CHILD Zola Elizabeth Lisonbee } Born } YES  
If 1 is not named, make Supplemental Report on blank obtainable from local registrar. } Alive } ☒

Sex of Child	Girl	Twin, Triplet or other	One	and	Number in order of birth	3rd	Legitimate? Yes	Date of Birth	Nov- 14th	1913	
									(Month)	(Day)	(Yr.)
Full Name FATHER						Full Maiden Name MOTHER					
Joseph Earl Lisonbee						Norma Effie Rogers					
Residence						Residence					
Mesa						Mesa					
Color or Race		White		Age at last Birthday		25		Color or Race		White	
						(Years)					
Birthplace		Utah		Birthplace		Arizona		Age at last Birthday		25	
										(Years)	
Occupation						Occupation					
Farming						Housewife					

Number of child of this mother... 3... Number of children, of this mother, now living... 3... Were precautions taken against Ophthalmia neonatorum?... Yes...

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

I hereby certify that I attended the birth of above child; and that it occurred on Nov. 14th 1913, at 1.45A.M.

\*When there is no attending physician or midwife, then the householder should make this return.

(Signature) J.B. Nelson M.D.  
(Attending physician, midwife, householder. \*)

Given or christian name added from a supplemental report ..... 191.....

Address Mesa

Filed 12/26/1913 J.E. Drane LOCAL REGISTRAR.

Filed 1-7-1914 W. H. Hughes COUNTY REGISTRAR.

935-1114-592  
COUNTY REGISTRAR.

N. B. - In case of any change in the number of each, in order of birth, stated. This certificate must be filed by the midwife with each local Registrar within 5 days after birth.